

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

. 20,500.						
Complete this report in duplicate at the time Send copy to Department of Health and Seni	of the regular monthly for Services; retain orig	preventative mair	ntenance check, a t file.	nd whenever inst	rument is repaired	
ALCO SENSOR IV SN 097445	ENSOR IV SN PRINTER SN			DATE OF INSPECTION 06/13/2016		
LOCATION OF INSTRUMENT (STREET AND CITY) 300 N.New Ballas Rd. Creve Coeur, MC)		***************************************	TIME OF INSPECT 0:19 am	IÓN	
CHECKLIST: Place a mark in the box by eac	h item if found to be sa	itisfactory or if ope	rating within estab	t .	te in observed val-	
ues where determined.) Unmarked items mus		using instrument.	·			
DIGITAL READOUT (ALL ELEMENTS O	PERATIONAL)					
TEMPERATURE OF ALCO SENSOR (10	0°C - 40°C)		·	~		
PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPER						
BREATH ALCOHOL ACCURACY STANDAR	DS			inggagen om en de de troube terminate en med en en de trei de Alle de trei d		
SIMULATOR SOLUTION		COMPRES	SED ETHANOL-G	SAS MIXTURE		
STANDARD SUPPLIER RepCo LOT # 15001 EXP. DATE 05/20/2017						
SIMULATOR TEMPERATURE (34°C ± 0.	2°C) 34 SIM	IUI.ATOR SN	SD2784 SIMU	LATOR EXP DAT	re 07/13/2016	
0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	BETWEEN 0.076% an	d 0.084% INCLUS	SIVE			
TEST 1 * .097	EST 2 📽 .097		TEST 3 🗫 ,0	97		
RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH TEST (DO NOT INCLUDE SELF-ADMINISTERED T		G RANGES SINC	E THE LAST MAI	INTENANCE RE	PORT;	
REFUSALS 0 (004) . 0	(.0509)	(.1014) 0	(.1519)	0 (OVER	.19) 0	
List any new parts and describe any alleration established limits (use other side if necessary)		vas made to resto	ore the instrument	to operate satisfa	actorily and within	
INSPECTING OFFICER						
SIGNATURE	1. 1/con 69 e PO Michael Vaclavik 692					
11/PE II PERMIT NUMBER/EXPIRATION DAYE 240319 07/30/2016	<u> </u>		TELEPHONE NUMBE (314) 432-80	R		
Return completed report to the: Breath Alc 2875 Jame	ohol Program, MO Der es Boulevard ff, MO 63901	partment of Health	~- 		strict Office	

3101-188 STONYBROOK DRIVE RALEIGH, N.C. 27604 918-876-5480

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 15001

EXPIRATION DATE: May 20, 2017 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of .100 +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is May 21, 2015

The expiration date for this lot number is May 20, 2017

at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

RepCo Marketing, I

Form RM 02

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	test	RECOR	(I) 992	93 97
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Sub.	ject	I.D.	····	
Oper	ator	Name:	I.D.	
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<u>CC</u> _	<u>PO</u>	1300 K	1116	

nS IV Serial nos 697445 Version nos 532B	AS IV Serial no: 097445 Version not 5326
TEST RECORD 00294 Temr Date Time 210L	TEST RECORD 00295
Air Blank: G6/13/16 G0:21 .000 Calibration Check: 26 66/13/16 00:21 .097 Subject Name	Temp Date Time 218I Air Blank: 06/13/16 00:23 .000 Calibration Check: 26 06/13/16 00:23 .097
Wbject (.D.	Subject I.B.
rerator Hame, I.D. Po upcianic 692 Corp Book N6	Operator Name, I.D. **PO VALCAVIK 692** Location

AS IV Seriel not 897445 Version not 5328	TEST RECORD 88296	Sy Tene Zate Time 2161	0010: RF1 12 86/13/16 88:25	Subject Name	Subject I.B.	OFerator Hame, I.D.	To unclose one Loreiton	CCPD FOURTHORS	í
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STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

MICHAEL J VACLAVIK

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE7/30/2014	Wa man
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240319	Dal Vasterly
EXPIRES 7/30/2016	J
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
AO 680-0771 (6-16)	LA8-4 (R6-10)



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALGOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cerdinolder is euthorised to operate an evidential breath stochal instrument for the determination of the alcoholic content in breath form of expired a in Missour



Permit No 240319

Date Issued 7/30/2014 Date Expires 7/30/2016